

# PCT

## REQUEST

The undersigned requests that the present international application be processed according to the Patent Cooperation Treaty.

For receiving Office use only

International Application No.

International Filing Date

Name of receiving Office and "PCT International Application"

Applicant's or agent's file reference  
(if desired) (12 characters maximum) USYS-0147/04-006

<b>Box No. I TITLE OF INVENTION</b> REMOTE DISCOVERY AND SYSTEM ARCHITECTURE	
<b>Box No. II APPLICANT</b> <input type="checkbox"/> This person is also inventor	
Name and address: (Family name followed by given name; for a legal entity, full official designation. The address must include postal code and name of country. The country of the address indicated in this Box is the applicant's State (that is, country) of residence if no State of residence is indicated below.)	
UNISYS CORPORATION UNISYS WAY, MS/E8-114 BLUE BELL, PENNSYLVANIA 19424-0001 US	
Telephone No.	
Facsimile No.	
Teleprinter No.	
Applicant's registration No. with the Office	
State (that is, country) of nationality: US	State (that is, country) of residence: US
This person is applicant for the purposes of: <input type="checkbox"/> all designated States <input checked="" type="checkbox"/> all designated States except the United States of America <input type="checkbox"/> the United States of America only <input type="checkbox"/> the States indicated in the Supplemental Box	
<b>Box No. III FURTHER APPLICANT(S) AND/OR (FURTHER) INVENTOR(S)</b>	
Name and address: (Family name followed by given name; for a legal entity, full official designation. The address must include postal code and name of country. The country of the address indicated in this Box is the applicant's State (that is, country) of residence if no State of residence is indicated below.)	
STEFANIK, Joseph P. 6805 Terraza Escondida San Clemente, California 92673 US	
This person is: <input type="checkbox"/> applicant only <input checked="" type="checkbox"/> applicant and inventor <input type="checkbox"/> inventor only (If this check-box is marked, do not fill in below.)	
Applicant's registration No. with the Office	
State (that is, country) of nationality: US	State (that is, country) of residence: US
This person is applicant for the purposes of: <input type="checkbox"/> all designated States <input type="checkbox"/> all designated States except the United States of America <input checked="" type="checkbox"/> the United States of America only <input type="checkbox"/> the States indicated in the Supplemental Box	
<input checked="" type="checkbox"/> Further applicants and/or (further) inventors are indicated on a continuation sheet.	
<b>Box No. IV AGENT OR COMMON REPRESENTATIVE; OR ADDRESS FOR CORRESPONDENCE</b>	
The person identified below is hereby/has been appointed to act on behalf of the applicant(s) before the competent International Authorities as: <input checked="" type="checkbox"/> agent <input type="checkbox"/> common representative	
Name and address: (Family name followed by given name; for a legal entity, full official designation. The address must include postal code and name of country.)	
STARR, Mark T.; ATLASS, Michael B.; RODE, Lise A. UNISYS CORPORATION Unisys Way, MS/E8-114 Blue Bell, Pennsylvania 19424-0001 US	
Telephone No. 215 986-4411	
Facsimile No. 215 986-4411	
Teleprinter No.	
Agent's registration No. with the Office 28,762;30,606;37,226	
<input type="checkbox"/> Address for correspondence: Mark this check-box where no agent or common representative is/has been appointed and the space above is used instead to indicate a special address to which correspondence should be sent.	

## Continuation of Box No. III FURTHER APPLICANT(S) AND/OR (FURTHER) INVENTOR(S)

If none of the following sub-boxes is used, this sheet should not be included in the request.

Name and address: (Family name followed by given name; for a legal entity, full official designation. The address must include postal code and name of country. The country of the address indicated in this Box is the applicant's State (that is, country) of residence if no State of residence is indicated below.) <b>MUTSCHLER, Eugene O., III</b> <b>39 Maracay</b> <b>San Clemente, California 92672</b> <b>US</b>	This person is: <input type="checkbox"/> applicant only <input type="checkbox"/> applicant and inventor <input checked="" type="checkbox"/> inventor only (If this check-box is marked, do not fill in below.)
	Applicant's registration No. with the Office

State (that is, country) of nationality: <b>US</b>	State (that is, country) of residence: <b>US</b>
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This person is applicant for the purposes of: <input type="checkbox"/> all designated States <input type="checkbox"/> all designated States except the United States of America <input checked="" type="checkbox"/> the United States of America only <input type="checkbox"/> the States indicated in the Supplemental Box
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Name and address: (Family name followed by given name; for a legal entity, full official designation. The address must include postal code and name of country. The country of the address indicated in this Box is the applicant's State (that is, country) of residence if no State of residence is indicated below.) <b>ZIEBELL, Jonathan V.</b> <b>21391 Eastglen Drive</b> <b>Trabuco Canyon, California 92679</b> <b>US</b>	This person is: <input type="checkbox"/> applicant only <input type="checkbox"/> applicant and inventor <input checked="" type="checkbox"/> inventor only (If this check-box is marked, do not fill in below.)
	Applicant's registration No. with the Office

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	Applicant's registration No. with the Office

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Name and address: (Family name followed by given name; for a legal entity, full official designation. The address must include postal code and name of country. The country of the address indicated in this Box is the applicant's State (that is, country) of residence if no State of residence is indicated below.) <b>HARRISON, Robert M.</b> <b>27329 Paseo Placentia</b> <b>San Juan Capistrano, California 92675-5357</b> <b>US</b>	This person is: <input type="checkbox"/> applicant only <input type="checkbox"/> applicant and inventor <input checked="" type="checkbox"/> inventor only (If this check-box is marked, do not fill in below.)
	Applicant's registration No. with the Office

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☒ Further applicants and/or (further) inventors are indicated on another continuation sheet.

<b>Continuation of Box No. III FURTHER APPLICANT(S) AND/OR (FURTHER) INVENTOR(S)</b> <i>If none of the following sub-boxes is used, this sheet should not be included in the request.</i>	
<p><b>Name and address:</b> <i>(Family name followed by given name; for a legal entity, full official designation. The address must include postal code and name of country. The country of the address indicated in this Box is the applicant's State (that is, country) of residence if no State of residence is indicated below.)</i></p> <p><b>MOORE, Jeffrey A.</b>  <b>23522 Via Calzada</b>  <b>Mission Viejo, California 92691</b>  <b>US</b></p>	<p><b>This person is:</b></p> <p><input type="checkbox"/> applicant only</p> <p><input type="checkbox"/> applicant and inventor</p> <p><input checked="" type="checkbox"/> inventor only <i>(If this check-box is marked, do not fill in below.)</i></p> <p>Applicant's registration No. with the Office</p>
<p>State <i>(that is, country)</i> of nationality:  <b>US</b></p>	<p>State <i>(that is, country)</i> of residence:  <b>US</b></p>
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<p><input type="checkbox"/> Further applicants and/or (further) inventors are indicated on another continuation sheet.</p>	

**Box No. V DESIGNATIONS**

The filing of this request constitutes under Rule 4.9(a), the designation of all Contracting States bound by the PCT on the international filing date, for the grant of every kind of protection available and, where applicable, for the grant of both regional and national patents.

However,

- ☐ DE Germany is not designated for any kind of national protection
- ☐ KR Republic of Korea is not designated for any kind of national protection
- ☐ RU Russian Federation is not designated for any kind of national protection

(The check-boxes above may be used to exclude (irrevocably) the designations concerned in order to avoid the ceasing of the effect, under the national law, of an earlier national application from which priority is claimed. See the Notes to Box No. V as to the consequences of such national law provisions in these and certain other States.)

**Box No. VI PRIORITY CLAIM**

The priority of the following earlier application(s) is hereby claimed:

Filing date of earlier application (day/month/year)	Number of earlier application	Where earlier application is:		
		national application: country or Member of WTO	regional application:* regional Office	international application: receiving Office
item (1) 19 March 2003 (19.03.03)	60/455,749	US		
item (2)				
item (3)				

- ☐ Further priority claims are indicated in the Supplemental Box.

The receiving Office is requested to prepare and transmit to the International Bureau a certified copy of the earlier application(s) (only if the earlier application was filed with the Office which for the purposes of this international application is the receiving Office) identified above as:

- ☐ all items    ☐ item (1)    ☐ item (2)    ☐ item (3)    ☐ other, see Supplemental Box

\* Where the earlier application is an ARIPO application, indicate at least one country party to the Paris Convention for the Protection of Industrial Property or one Member of the World Trade Organization for which that earlier application was filed (Rule 4.10(b)(ii)): . . . .

**Box No. VII INTERNATIONAL SEARCHING AUTHORITY**

Choice of International Searching Authority (ISA) (if two or more International Searching Authorities are competent to carry out the international search, indicate the Authority chosen; the two-letter code may be used):

ISA / US

Request to use results of earlier search; reference to that search (if an earlier search has been carried out by or requested from the International Searching Authority):

Date (day/month/year)                      Number                      Country (or regional Office)

**Box No. VIII DECLARATIONS**

The following declarations are contained in Boxes Nos. VIII (i) to (v) (mark the applicable check-boxes below and indicate in the right column the number of each type of declaration):

- |   |  |   |  |
|---|--|---|--|
| <input type="checkbox"/> Box No. VIII (i)   | Declaration as to the identity of the inventor   | : |  |
| <input type="checkbox"/> Box No. VIII (ii)  | Declaration as to the applicant's entitlement, as at the international filing date, to apply for and be granted a patent             | : |  |
| <input type="checkbox"/> Box No. VIII (iii) | Declaration as to the applicant's entitlement, as at the international filing date, to claim the priority of the earlier application | : |  |
| <input type="checkbox"/> Box No. VIII (iv)  | Declaration of inventorship (only for the purposes of the designation of the United States of America)                               | : |  |
| <input type="checkbox"/> Box No. VIII (v)   | Declaration as to non-prejudicial disclosures or exceptions to lack of novelty   | : |  |

Number of  
declarations

Box No. IX CHECK LIST; LANGUAGE OF FILING																																																							
<p>This international application contains:</p> <p>(a) In paper form, the following number of sheets:</p> <table style="width: 100%; border-collapse: collapse;"> <tr> <td style="padding: 2px;">request (including declaration sheets)</td> <td style="text-align: right; padding: 2px;">5</td> </tr> <tr> <td style="padding: 2px;">description (excluding sequence listing and/or tables related thereto)</td> <td style="text-align: right; padding: 2px;">30</td> </tr> <tr> <td style="padding: 2px;">claims</td> <td style="text-align: right; padding: 2px;">3</td> </tr> <tr> <td style="padding: 2px;">abstract</td> <td style="text-align: right; padding: 2px;">1</td> </tr> <tr> <td style="padding: 2px;">drawings</td> <td style="text-align: right; padding: 2px;">20</td> </tr> <tr> <td style="padding: 2px;"><b>Sub-total number of sheets</b></td> <td style="text-align: right; padding: 2px;"><b>59</b></td> </tr> <tr> <td style="padding: 2px;">sequence listing</td> <td></td> </tr> <tr> <td style="padding: 2px;">tables related thereto</td> <td></td> </tr> <tr> <td style="padding: 2px;"><i>(for both, actual number of sheets if filed in paper form, whether or not also filed in computer readable form; see (c) below)</i></td> <td></td> </tr> <tr> <td style="padding: 2px;"><b>Total number of sheets</b></td> <td style="text-align: right; padding: 2px;"><b>59</b></td> </tr> </table> <p>(b) <input type="checkbox"/> only in computer readable form (Section 801(a)(i))</p> <p style="margin-left: 20px;">(i) <input type="checkbox"/> sequence listing</p> <p style="margin-left: 20px;">(ii) <input type="checkbox"/> tables related thereto</p> <p>(c) <input type="checkbox"/> also in computer readable form (Section 801(a)(ii))</p> <p style="margin-left: 20px;">(i) <input type="checkbox"/> sequence listing</p> <p style="margin-left: 20px;">(ii) <input type="checkbox"/> tables related thereto</p> <p>Type and number of carriers (diskette, CD-ROM, CD-R or other) on which are contained the</p> <p style="margin-left: 20px;"><input type="checkbox"/> sequence listing:</p> <p style="margin-left: 20px;"><input type="checkbox"/> tables related thereto:</p> <p style="margin-left: 20px;"><i>(additional copies to be indicated under items 9(ii) and/or 10(ii), in right column)</i></p>	request (including declaration sheets)	5	description (excluding sequence listing and/or tables related thereto)	30	claims	3	abstract	1	drawings	20	<b>Sub-total number of sheets</b>	<b>59</b>	sequence listing		tables related thereto		<i>(for both, actual number of sheets if filed in paper form, whether or not also filed in computer readable form; see (c) below)</i>		<b>Total number of sheets</b>	<b>59</b>	<p>This international application is accompanied by the following item(s) (mark the applicable check-boxes below and indicate in right column the number of each item):</p> <table style="width: 100%; border-collapse: collapse;"> <tr> <td style="padding: 2px;">1. <input checked="" type="checkbox"/> fee calculation sheet</td> <td style="text-align: right; padding: 2px;">1</td> </tr> <tr> <td style="padding: 2px;">2. <input type="checkbox"/> original separate power of attorney</td> <td style="text-align: right; padding: 2px;"></td> </tr> <tr> <td style="padding: 2px;">3. <input type="checkbox"/> original general power of attorney</td> <td style="text-align: right; padding: 2px;"></td> </tr> <tr> <td style="padding: 2px;">4. <input type="checkbox"/> copy of general power of attorney; reference number, if any:</td> <td style="text-align: right; padding: 2px;"></td> </tr> <tr> <td style="padding: 2px;">5. <input type="checkbox"/> statement explaining lack of signature</td> <td style="text-align: right; padding: 2px;"></td> </tr> <tr> <td style="padding: 2px;">6. <input type="checkbox"/> priority document(s) identified in Box No. VI as item(s):</td> <td style="text-align: right; padding: 2px;"></td> </tr> <tr> <td style="padding: 2px;">7. <input type="checkbox"/> translation of international application into (language):</td> <td style="text-align: right; padding: 2px;"></td> </tr> <tr> <td style="padding: 2px;">8. <input type="checkbox"/> separate indications concerning deposited microorganism or other biological material</td> <td style="text-align: right; padding: 2px;"></td> </tr> <tr> <td style="padding: 2px;">9. <input type="checkbox"/> sequence listing in computer readable form (indicate type and number of carriers)</td> <td style="text-align: right; padding: 2px;"></td> </tr> <tr> <td style="padding: 2px;">(i) <input type="checkbox"/> copy submitted for the purposes of international search under Rule 13ter only (and not as part of the international application)</td> <td style="text-align: right; padding: 2px;"></td> </tr> <tr> <td style="padding: 2px;">(ii) <input type="checkbox"/> (only where check-box (b)(i) or (c)(i) is marked in left column) additional copies including, where applicable, the copy for the purposes of international search under Rule 13ter</td> <td style="text-align: right; padding: 2px;"></td> </tr> <tr> <td style="padding: 2px;">(iii) <input type="checkbox"/> together with relevant statement as to the identity of the copy or copies with the sequence listing mentioned in left column</td> <td style="text-align: right; padding: 2px;"></td> </tr> <tr> <td style="padding: 2px;">10. <input type="checkbox"/> tables in computer readable form related to sequence listing (indicate type and number of carriers)</td> <td style="text-align: right; padding: 2px;"></td> </tr> <tr> <td style="padding: 2px;">(i) <input type="checkbox"/> copy submitted for the purposes of international search under Section 802(b-quater) only (and not as part of the international application)</td> <td style="text-align: right; 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PQA's-2 pgs</td> <td style="text-align: right; padding: 2px;"></td> </tr> </table>	1. <input checked="" type="checkbox"/> fee calculation sheet	1	2. <input type="checkbox"/> original separate power of attorney		3. <input type="checkbox"/> original general power of attorney		4. <input type="checkbox"/> copy of general power of attorney; reference number, if any:		5. <input type="checkbox"/> statement explaining lack of signature		6. <input type="checkbox"/> priority document(s) identified in Box No. VI as item(s):		7. <input type="checkbox"/> translation of international application into (language):		8. <input type="checkbox"/> separate indications concerning deposited microorganism or other biological material		9. <input type="checkbox"/> sequence listing in computer readable form (indicate type and number of carriers)		(i) <input type="checkbox"/> copy submitted for the purposes of international search under Rule 13ter only (and not as part of the international application)		(ii) <input type="checkbox"/> (only where check-box (b)(i) or (c)(i) is marked in left column) additional copies including, where applicable, the copy for the purposes of international search under Rule 13ter		(iii) <input type="checkbox"/> together with relevant statement as to the identity of the copy or copies with the sequence listing mentioned in left column		10. <input type="checkbox"/> tables in computer readable form related to sequence listing (indicate type and number of carriers)		(i) <input type="checkbox"/> copy submitted for the purposes of international search under Section 802(b-quater) only (and not as part of the international application)		(ii) <input type="checkbox"/> (only where check-box (b)(ii) or (c)(ii) is marked in left column) additional copies including, where applicable, the copy for the purposes of international search under Section 802(b-quater)		(iii) <input type="checkbox"/> together with relevant statement as to the identity of the copy or copies with the tables mentioned in left column		11. <input checked="" type="checkbox"/> other (specify): Return Receipt Ptd. & 2. unexec. 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Figure of the drawings which should accompany the abstract: 2	Language of filing of the international application:																																																						
<p><b>Box No. X SIGNATURE OF APPLICANT, AGENT OR COMMON REPRESENTATIVE</b></p> <p><i>Next to each signature, indicate the name of the person signing and the capacity in which the person signs (if such capacity is not obvious from reading the request).</i></p> <div style="border: 1px solid black; height: 40px; margin-top: 10px; position: relative;"> <div style="position: absolute; bottom: 5px; left: 5px;"> </div> </div> <p>SWOPE, Michael J. Reg. No. 38,041</p>																																																							
<p style="text-align: center;">For receiving Office use only</p> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 70%; padding: 5px;"> <p>1. Date of actual receipt of the purported international application:</p> <p>3. Corrected date of actual receipt due to later but timely received papers or drawings completing the purported international application:</p> <p>4. Date of timely receipt of the required corrections under PCT Article 11(2):</p> <p>5. International Searching Authority (if two or more are competent): ISA /</p> </td> <td style="width: 30%; padding: 5px;"> <p>2. Drawings:</p> <p><input type="checkbox"/> received:</p> <p><input type="checkbox"/> not received:</p> </td> </tr> <tr> <td colspan="2" style="padding: 5px;"> <p>6. <input type="checkbox"/> Transmittal of search copy delayed until search fee is paid</p> </td> </tr> </table>		<p>1. Date of actual receipt of the purported international application:</p> <p>3. Corrected date of actual receipt due to later but timely received papers or drawings completing the purported international application:</p> <p>4. Date of timely receipt of the required corrections under PCT Article 11(2):</p> <p>5. International Searching Authority (if two or more are competent): ISA /</p>	<p>2. Drawings:</p> <p><input type="checkbox"/> received:</p> <p><input type="checkbox"/> not received:</p>	<p>6. <input type="checkbox"/> Transmittal of search copy delayed until search fee is paid</p>																																																			
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This sheet is not part of and does not count as a sheet of the international application.

**PCT**

**FEE CALCULATION SHEET**

Annex to the Request

For receiving Office use only

International Application No.

Date stamp of the receiving Office

Applicant's or agent's  
file reference

USYS-0147/04-006

Applicant

UNISYS CORPORATION

**CALCULATION OF PRESCRIBED FEES**

**1. TRANSMITTAL FEE**

300.00 **T**

**2. SEARCH FEE**

International search to be carried out by

US

(If two or more International Searching Authorities are competent to carry out the international search, indicate the name of the Authority which is chosen to carry out the international search.)

1000.00 **S**

**3. INTERNATIONAL FILING FEE**

Where items (b) and/or (c) of Box No. IX apply, enter Sub-total number of sheets } 59  
Where items (b) and (c) of Box No. IX do not apply, enter Total number of sheets }

**i1** first 30 sheets

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number of sheets  
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(Applicants from certain States are entitled to a reduction of 75% of the international filing fee. Where the applicant is (or all applicants are) so entitled, the total to be entered at I is 25% of the international filing fee.)

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**MODE OF PAYMENT**

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☐ postal money order

☐ cash

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Receiving Office: RO/ US

Deposit Account No.: 23-3050

Date: 19 March 2004

Name: SWOPE, Michael J.

Signature: 